

Cyanide Yard

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C A D 0 8 6 5 1 0 0 0 5	Manifest Document No.	2. Page 1 1 of 1	Information in the shaded areas is not required by Federal law.		
3. Generator's Name and Mailing Address Douglas Aircraft Company 190th St & Normandie Ave, Torrance CA 90502			A.State Manifest Document Number 84827693				
4. Generator's Phone (213) 533-6677			B.State Generator's ID				
5. Transporter 1 Company Name J.C. Liquid Waste Disposal		6. US EPA ID Number C A D 0 5 8 0 1 8 3 6 7		C.State Transporter's ID 64164			
7. Transporter 2 Company Name		8. US EPA ID Number		D.Transporter's Phone 213 268-3137			
9. Designated Facility Name and Site Address IT Corp. 896 Waterbird Way Martinez, CA 94553		10. US EPA ID Number C A D 0 0 0 0 9 4 7 7 1		E.State Transporter's ID			
				F.Transporter's Phone			
				G.State Facility's ID C A D 0 0 0 0 7 4 7 7 1			
				H.Facility's Phone 415 228-5100			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12.Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Waste Cyanide Solution, NOS Poison B UN1935			0 0 1	TT	020.00	GL	132
b.							
c.							
d.							
J. Additional Descriptions for Materials Listed Above				K.Handling Codes for Wastes Listed Above			
Sodium Cyanide 12.0 % Water 80.6 %				15/06			
Cadmium Oxide 2.8 %							
Sodium Hydroxide 2.4 %							
Sodium Carbonate 2.0 % 2.2 (8)							
15. Special Handling Instructions and Additional Information Avoide breathing & contack with skin, keep away from acid Guide # 55 H.H. permit #3-8251							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.							
Printed/Typed Name Donald C Gerber			Signature <i>Donald C Gerber</i>		Date 08/31/86		
17. Transporter 1 Acknowledgement of Receipt of Materials			Signature <i>Phillip Salgado</i>		Date 07/31/86		
Printed/Typed Name Phillip Salgado 58172							
18. Transporter 2 Acknowledgement of Receipt of Materials			Signature <i>William Spear</i>		Date 08/01/86		
Printed/Typed Name William Spear							
19. Discrepancy Indication Space SECTION 13 INCOMPLETE. SHOULD BE 2000 G PER DON GERBER OF DOUGLAS AIRCRAFT. L.S.I.V.							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						Date	
Printed/Typed Name Gregory T. Ford			Signature <i>Gregory T. Ford</i>		Date 08/01/86		

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4. Generator's Phone (213) 533-6677			B.State Generator's ID				
5. Transporter 1 Company Name J.C. Liquid Waste Disposal		6. US EPA ID Number C A D 0 5 8 0 1 8 3 6 7		C.State Transporter's ID 2164			
7. Transporter 2 Company Name		8. US EPA ID Number		D.Transporter's Phone 213-268-3137			
9. Designated Facility Name and Site Address IT Corp. 896 Waterbird Way Martinez, CA 94553		10. US EPA ID Number C A D 0 0 0 0 9 4 7 7 1		E.State Transporter's ID F.Transporter's Phone G.State Facility's ID H.Facility's Phone 415-228-5100			
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J. Additional Descriptions for Materials Listed Above Sodium Cyanide 12.0 % Water 80.6 % Cadmium Oxide 2.8 % Sodium Hydroxide 2.4 % Sodium Carbonate 2.0 % 2.2 %			K.Handling Codes for Wastes Listed Above				
15. Special Handling Instructions and Additional Information Avoide breathing & contack with skin, keep away from acid Guide # 55 H.H. permit #3-8251							
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Printed/Typed Name Donald C Gerber			Signature <i>Donald C Gerber</i>			Date Month Day Year 07 18 66	
17. Transporter 1 Acknowledgement of Receipt of Materials			Signature <i>Phillip Gallagos</i>			Date Month Day Year 07 18 66	
Printed/Typed Name Phillip Gallagos 58172			Signature <i>Phillip Gallagos</i>			Date Month Day Year 07 18 66	
18. Transporter 2 Acknowledgement of Receipt of Materials			Signature			Date Month Day Year	
Printed/Typed Name			Signature			Date Month Day Year	
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.							
Printed/Typed Name			Signature			Date Month Day Year	